

PTO/SB/21 (09-04)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/711,114
	Filing Date	August 24, 2004
	First Named Inventor	Jochumson, Christopher S.
	Art Unit	2641
	Examiner Name	Unassigned
	Attorney Docket Number	022207-010120US
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard PTO Forms SB/08A and SB/08B 0 Copies of References Enclosed
Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Melvin D. Chan		
Date	4-8-2005	Reg. No.	39,626

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Tiffany Wu	Date	4/13/05

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PATENT
Attorney Docket No.: 022207-010120US

Commissioner for Patents
P.O. Box 1450
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On

4/13/05



TOWNSEND and TOWNSEND and CREW LLP

By:

Tiffany Wu

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

CHRISTOPHER S.
JOCHUMSON et al.

Application No.: 10/711,114

Filed: August 24, 2004

For: METHOD AND SYSTEM FOR
NETWORK-BASED SPEECH
RECOGNITION

Examiner: Unassigned

Art Unit: 2641

INFORMATION DISCLOSURE
STATEMENT UNDER 37 CFR §1.97 and
§1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are not enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

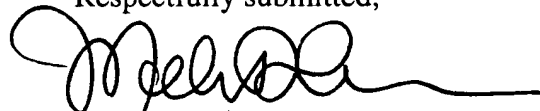
As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement.

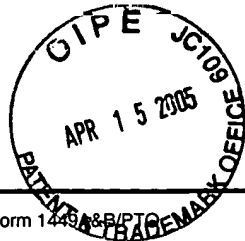
However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Melyin D. Chan', with a long horizontal flourish extending to the right.

Melyin D. Chan
Reg. No. 39,626

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INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)			Complete if Known		
			Application Number	10/711,114	
			Filing Date	August 24, 2004	
			First Named Inventor	Jochumson, Christopher S.	
			Art Unit	2641	
			Examiner Name	Unassigned	
Sheet	1	of	1	Attorney Docket Number	022207-010120US

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			
	1	US-5,886,276	03-23-1999	Levine et al.	
	2	US-5,960,399	09-28-1999	Barclay et al.	
	3	US-6,175,822	01-16-2001	Jones	
	4	US-6,216,104	04-10-2001	Moshfeghi et al.	
	5	US-6,289,390	09-11-2001	Kavner	
	6	US-6,453,290	09-17-2002	Jochumson	

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
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NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.